
	United States <b>Environmental Protection Agency</b> Washington, DC 20460	<input type="checkbox"/> <b>Registration</b> <input type="checkbox"/> <b>Amendment</b> <input checked="" type="checkbox"/> <b>Other</b> _____	OPP Identifier Number
<b>Application for Pesticide – Section I</b>			
1. Company/Product Number 11678-63		2. EPA Product Manager Tamica Cain	
4. Company/Product (Name) DIAZOL (DIAZINON) STABILIZED OIL CONCENTRATE AG		3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted	
5. Name And Address Of Applicant (Include ZIP Code) <b>Makhteshim Agan of North America, Inc. (d/b/a ADAMA)</b> <b>3120 Highwoods Blvd., Suite 100</b> <b>Raleigh, NC 27604</b> <input type="checkbox"/> Check if this is a new address		6. <b>Expedited Review.</b> In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	
<b>Section II</b>			
<input type="checkbox"/> Amendment – Explain below. <span style="margin-left: 100px;"><input type="checkbox"/> Final Printed labels in response to Agency letter dated _____</span> <input checked="" type="checkbox"/> Resubmission in response to Agency letter dated <u>July 21, 2022</u> <span style="margin-left: 100px;"><input type="checkbox"/> "Me Too" Application.</span> <input type="checkbox"/> Notification – Explain below. <span style="margin-left: 100px;"><input type="checkbox"/> Other – Explain Below.</span>			
<b>Explanation:</b> Use additional page(s) if necessary. (For section I and Section II.) ADAMA Makhteshim c/ Makhteshim Agan of North America, Inc. (d/b/a ADAMA) is hereby submitting a fast-track amendment to the product DIAZOL (DIAZINON) STABILIZED OIL CONCENTRATE AG (EPA Reg. N. 11678-63) to submit the required technical label changes based on the June 30, 2022, National Marine Fisheries Services' (NMFS) Revised Biological Opinion on the effects of EPAs national registration of diazinon.			
<b>Section III</b>			
1. Material This Product Will Be Packaged In:			
Child Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No <b>* Certification must be submitted</b>	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes"      No. per Unit Packaging wgt.      Container	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes"      No. per Unit Packaging wgt.      Container	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) - _____
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(S) Retail Container	5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Lithographed <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled <span style="float: right;"><input type="checkbox"/> Other _____</span>			
<b>Section IV</b>			
1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Miriam Frugis		Title U.S. Registration Leader	Telephone No. (Include Area Code) D. +1 919 256-9329   M. +1
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received <b>(Stamped)</b>
2. Signature 		3. Title U.S. Registration Leader   Regulatory Affairs	
4. Typed Name Miriam Frugis		5. Date August 8, 2022	